

LETTER OF CONSENT

TANDEM SKYDIVE/AFF STUDENT

I hereby give my consent to _____
(name and surname of the person under aged) born on _____ with
Passport number _____ to practice at Skydive Spain:

- Tandem Skydive**
- AFF course**
- or other kind of course,**

Details of the Tandem Skydive/AFF Course/Other course:

Date: _____
Arrival Time: _____

Signature of both parents:

- Signature, full name and Passport number of the father in capital letters:

- _____
Signature, full name and Passport number of the mother in capital letters:

Address: _____

Telephone number: _____

In case that just one of parents signs, please mark the reason:

- I have the legal custody of the under aged
- I am a single mother/father
- I am the only living parent of the child
- Others(please explain)

On _____ of _____ 201__